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Examiner Initial	Document No.	Name	Date	Class	Subclass	Filing Date (If appropriate)
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FOURTH PART DOCUMENTS					
Document No.			Date	Country	Translation (Yes or No)
<u>/K.O./</u>	AF	WO 94/20995	09/15/94	PCT	Yes
<u>/K.O./</u>	AG	EP 0 507 090 A1	10/07/92	Europe	Yes
<u> </u>	AH				
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Examiner	/Karie O'Neill/	Date Considered	08/11/2009